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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Academy of Dermatology Association Political Action Committee (SkinPAC) 1445 New York Avenue NW ADDRESS (number and street) Ste 800 Check if different than previously Washington DC 20005 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00359539 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Oct 20 (M10) Jul 20 (M7) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day Х (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the 11 02 2010 Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 10 0 1 2010 10 13 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Steven Debnar Type or Print Name of Treasurer Electronically Filed by Steven Debnar 10 2 1 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

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FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name American Academy of Dermatology Association Political Action Committee (SkinPAC)

D D 2010 10 0 1 2010 10 13 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 273974.15 January 1 (b) Cash on Hand at 302179.96 Begining of Reporting Period 4380.00 280681.75 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 306559.96 554655.90 6(a) and 6(c) for Column B) 58024.66 306120.60 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 248535.30 248535.30 (subtract Line 7 from Line 6(d)) Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 18

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

м м 1 0 0 1 м°м 10 1 3 2010 2010 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 3480.00 238229.50 (i) Itemized (use Schedule A) 900.00 42452.25 (ii) Unitemized (iii) TOTAL (add 4380.00 280681.75 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 4380.00 280681.75 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 4380.00 280681.75 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts

4380.00

280681.75

(subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 18

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	524.66	5620.60
	Expenditures(c) Total Operating Expenditures	324.00	3020.00
	(add 21(a)(i), (a)(ii) and (b))	524.66	5620.60
2.	Transfers to Affiliated/Other Party	0.00	0.00
3.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	57500.00	300500.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	58024.66	306120.60
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	T000100	222125 55
	from Line 31)	58024.66	306120.60

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 18

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) from Line 11(d), page 3)	4380.00	280681.75
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
Net Contributions (other than loans) (subtract Line 34 from Line 33)	4380.00	280681.75
i. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	524.66	5620.60
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	524.66	5620.60

FE6AN026

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 18 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Dermatology	e name and add	dress of any political committee t	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Ronald Jeffrey Barr Mailing Address 34 Campanilla City San Clemente FEC ID number of contributing federal political committee. Name of Employer Dermatopathology Laboratory Receipt For: Primary General Other (specify)	State CA C Occupation Dermato Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Kenneth Henry Katz Mailing Address 9801 Lakeshore Rd City Newton FEC ID number of contributing federal political committee. Name of Employer Dermatology Associates of Wisconsin Receipt For: Primary General Other (specify)	State WI C Occupation Dermatol Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y 1 0 4 2 0 1 0 Transaction ID: AA01DEC52B81A4511BB Amount of Each Receipt this Period 2000.00
c.	Full Name (Last, First, Middle Initial) Larry Edward Millikan Mailing Address 5330 Kingswood Ct City Cumming FEC ID number of contributing federal political committee. Name of Employer Tulane Affiliates Clinic Receipt For: Primary General Other (specify) ▼	State GA C Occupation Physican Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y 1 0
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			2730.00

В.

CHEDULE A (FEC Form 3) FEMIZED RECEIPTS	for each ca	ate schedule(s) tegory of the ımmary Page	FOR LINE NUMBER: PAGE 7 / 18 (check only one) X 11a 11b 11c 12 13 14 15 16 17
ny information copied from such Reports ar r for commercial purposes, other than using	d Statements may not be sold or the name and address of any po	used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Dermatology	Association Political Action	n Committee (Sk	kinPAC)
Full Name (Last, First, Middle Initial) Kristine A. Romine			Date of Receipt
Mailing Address 4925 E Palomino R	d		10 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: A84499E601A434295A0F
Phoenix	AZ 85018-18	315	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Camelback Dermatology	Occupation Office Manager		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	250.00	
Full Name (Last, First, Middle Initial) Joanne K. Simpson	-		Date of Receipt
Mailing Address 1304 Roundhouse I Apt 311	.n		10 06 YYYYY 2010
City	State Zip Code		Transaction ID: A5E74855A1D6E4D3EAF
Alexandria	VA 22314-59	929	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Alexandria Associates in Dermatology	Occupation Physician		1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	500.00	

SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number only)	>	3480.00

SCHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)		FOR LINE NUMBER: (check only one)		PA	PAGE 8/18					
TEMIZED DISBURSEMENTS		category of the Summary Page		_	2:	_	23 28b		24 28c	25 29		26 30b
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NAME OF COMMITTEE (In Full)	Tiame and addre	33 of arry political	COITIII		Olicit C	Ontinoc	1110113 11	OIII	Suci i c	Ommittee		
American Academy of Dermatology As	ssociation Pol	itical Action Co	nmit	tee (Ski	inPAC	C)						
Full Name (Last, First, Middle Initial) American Express										DE8CC.	740E	4E34
					↓ г	M M	Disburs	eme) 1	TIL / Y	YYY	_ Y	
Mailing Address PO Box 53852						1 0) 1		ž 0 1	0	
City Phoenix	State AZ	Zip Code 85072-3852			Aı	mount	of Each	Dis	burse	ment this	Peri	od
Purpose of Disbursement Amex Fees					1 L					184.2	29	
Candidate Name				egory/								
Senate President	oursement For: Primary Other (spe	General ecify) ▼		/pe								
State: District:												
Full Name (Last, First, Middle Initial) Merchant Services							tion ID Disburs			306320)924	678B
Mailing Address PO Box 6603						M M	/ D) ^D	/ Y	ž 0 1	0	
City Hagerstown	State MD	Zip Code 21741-6603			Aı	mount	of Each	Dis	burse	ment this	s Peri	od
Purpose of Disbursement VS/MC Fees					1 L					310.3	37	
Candidate Name				egory/ /pe								
Office Sought: Senate President State: Dist	oursement For: Primary Other (spe	General ecify) ▼		·								
Full Name (Last, First, Middle Initial) Merchant Services							tion ID Disburs			DFA883	3048	44C2
Mailing Address PO Box 6603					[1 0 M	/ D	5	/ Y	ž 0 1	0 Y	
City Hagerstown	State MD	Zip Code 21741-6603			Aı	mount	of Each	Dis	burse	ment this	s Peri	od
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Candidate Name				egory/ /pe								
Senate President	oursement For: Primary Other (spe	General ecify) ▼		1.5								
State: District:												
SUBTOTAL of Disbursements This Page (option	nal)			. •						524.6	66	
					Г					524.6	36	

В.

C.

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person f	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Dermatology Associ			
Full Name (Last, First, Middle Initial) Ameripac: the Fund for a Greater America			Transaction ID: B9B5FDD6C36D24848 Date of Disbursement
Mailing Address 607 14th Street, NW, Sui	te 800		$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q \\ 2 & 0 & 1 & O \end{bmatrix} $
	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement		0 0	2500.00
Candidate Name Office Sought: House Disburse	ment For: 2010	Category/ Type	
Senate President X	Primary General Other (specify) ▼		
State: District: Other20 Full Name (Last, First, Middle Initial) Bilirakis for Congress	010		Transaction ID: B806DBA0D23394AD1 Date of Disbursement
Mailing Address PO Box 606			10 13 / 2010 Y
,	State Zip Code FL 34688		Amount of Each Disbursement this Period
Purpose of Disbursement		• •	2000.00
Candidate Name Rep. Gus Michael Bilirakis		Category/ Type	
Senate President	ment For: 2010 Primary X General Other (specify)		
State: FL District: 09 Full Name (Last, First, Middle Initial) Charlie Dent for Congress			Transaction ID: BFF21868A47C94685/
Mailing Address PO Box 442			$\begin{bmatrix}\begin{smallmatrix}M&O&M\\1^M&O\end{smallmatrix}\end{bmatrix}^\top \begin{bmatrix}\begin{smallmatrix}D&D\\1^M&3\end{smallmatrix}\end{bmatrix}^\top \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2^M&1^M&O\end{smallmatrix}\end{bmatrix}$
	State Zip Code PA 18105		Amount of Each Disbursement this Period
Purpose of Disbursement		• •	2500.00
Candidate Name Rep. Charles W. Dent		Category/ Type	
Senate President	ment For: 2010 Primary X General Other (specify)		
State: PA District: 15 SUBTOTAL of Disbursements This Page (optional) .			7000.00
TOTAL This Period (last page this line number only)			

Any Inf or for c NA Am Full Co Mai City Ch Pur Car Re Off Sta Full Da Mai	commercial purposes, other than using the ME OF COMMITTEE (In Full) merican Academy of Dermatology Il Name (Last, First, Middle Initial) ommittee To Elect Chris Murphy ailing Address PO Box 127 by neshire rpose of Disbursement andidate Name ep. Christopher S. Murphy	Detailed Summary Page d Statements may not be sold or use the name and address of any political	al committee to so	22 X 23 24 25 26 28a 28b 28c 29 30b for the purpose of soliciting contributions slicit contributions from such committee
or for c NA Anr Full Co Mai City Ch Pur Car Re Off Sta Full Da Mai	commercial purposes, other than using the ME OF COMMITTEE (In Full) merican Academy of Dermatology II Name (Last, First, Middle Initial) committee To Elect Chris Murphy ailing Address PO Box 127 y meshire rpose of Disbursement condidate Name ep. Christopher S. Murphy fice Sought: X House Senate In the Indicate Indic	the name and address of any political Action C State Zip Code	d by any person fall committee to so	Transaction ID: B8B3A7DA803C04110 Date of Disbursement Amount of Each Disbursement this Period
Full Coo Main City Ch Pur Car Re Off Sta	Il Name (Last, First, Middle Initial) Dommittee To Elect Chris Murphy Dilling Address PO Box 127 y Deshire The prose of Disbursement Disbursement The prose of Disbursement The prose of Disbursement The prose of Disbursement The prose of Disbursement The prosecution of Disbursement The	State Zip Code		Transaction ID: B8B3A7DA803C04110 Date of Disbursement M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Sta Full Da Mai	Senate		Type	
Ful Da Mai	President	Disbursement For: 2010 Primary X General Other (specify) ▼		
Da Mai	ate: CT District: 05			
	Il Name (Last, First, Middle Initial) ave Camp for Congress 2010			Transaction ID: B6518E95806B84CC8 Date of Disbursement
	iling Address 5915 Eastman Av Suite 100	enue		10 13 / 2010
City Mic	y dland	State Zip Code MI 48640		Amount of Each Disbursement this Period
Pur	rpose of Disbursement			2500.00
	ndidate Name ep. Dave Camp		Category/ Type	
	fice Sought: X House Senate President District: 04	Disbursement For: 2010 Primary X General Other (specify) ▼		
Ful	Il Name (Last, First, Middle Initial) avid Scott for Congress			Transaction ID: B9C74106A3A484857 Date of Disbursement
Ma	ailing Address PO Box 960821			10 0 6 7 2 0 1 0
City Riv	y verdale	State Zip Code GA 30296		Amount of Each Disbursement this Period
	rpose of Disbursement			2500.00
	indidate Name ep. David A. Scott		Category/ Type	
	fice Sought: X House Senate President ate: GA District: 13	Disbursement For: 2010 Primary X General Other (specify) ▼		
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NAME OF COMMITTEE (In Full)											
American Academy of Dermatology Ass	ociation Political Action	n Comn	nittee (S	SkinP	PAC)						
Full Name (Last, First, Middle Initial) Frelinghuysen for Congress						action IE			53DF7	E654	42E
								Ι ι / Υ	ž 0 1	n Y	
Mailing Address 19 CATTANO AVENU					10		10		201		
City Morristown	State Zip Code NJ 07960				Amou	nt of Eac	h Disl	ourser	nent this	Perio	id
Purpose of Disbursement				1					1000.0	0	
Candidate Name Rep. Rodney Frelinghuysen		C	ategory/ Type								
Office Sought: X House Senate President State: NJ District: 11	rsement For: 2010 Primary X Gene Other (specify)	eral									
Full Name (Last, First, Middle Initial)					Trans	action ID): B	564F	F4D9B	C1B4	 18D
Friends of Joe Pitts					Date o	of Disburs	semer				
Mailing Address PO Box 775					1 0	M / D	13	/ _ Y	ž 0 1	0 1	
City Unionville	State Zip Code PA 19375				Amou	nt of Eac	h Disl	ourser	ment this	Perio	d
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Candidate Name Rep. Joseph R. Pitts		C	ategory/ Type								
Office Sought: X House Senate President State: PA District: 16	rsement For: 2010 Primary X Gene Other (specify)	eral									
Full Name (Last, First, Middle Initial) Friends of John McCain Inc						action ID	_		B9A3A	1144	495
Mailing Address PO Box 16664					1 ^M 0	M / D	06	/ Y	ž o ť	0 Y	
City Arlington	State Zip Code VA 22215				Amou	nt of Eac	h Disl	ourser	ment this	Perio	d
Purpose of Disbursement			•	1					2500.0	0	
Candidate Name Sen. John McCain			ategory/ Type	1							
X Senate President	rsement For: 2010 Primary X Gene Other (specify)	eral									
State: AZ District:											
<u>I</u>											

ry Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) American Academy of Dermatology Asso Full Name (Last, First, Middle Initial) Friends of Sam Johnson Mailing Address PO Box 860096	ne and address of any political	committee to sol	licit contributions from such committee
for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) American Academy of Dermatology Asso Full Name (Last, First, Middle Initial) Friends of Sam Johnson	ne and address of any political ciation Political Action Co	committee to sol	PAC) Transaction ID: B3DEE02BA90884AF6 Date of Disbursement
American Academy of Dermatology Assortion Full Name (Last, First, Middle Initial) Friends of Sam Johnson	State Zip Code	ommittee (Skin	Transaction ID: B3DEE02BA90884AF6 Date of Disbursement
Friends of Sam Johnson			Date of Disbursement
			Date of Disbursement
Mailing Address PO Box 860096			10 13 7 2010
City Plano			Amount of Each Disbursement this Period
Purpose of Disbursement			1000.00
Candidate Name Rep. Sam Johnson		Category/	
<u> </u>	sement For: 2010	Туре	
Senate President	Primary X General Other (specify) ▼		
State: TX District: 03	o and (opening) V		
Full Name (Last, First, Middle Initial) Gillibrand for Senate			Transaction ID: BE45D86222F414725 Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 236 Massachusetts Ave	Suite 110		10 12 2010
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement	20002		5000.00
Candidate Name Rep. Kirsten E. Gillibrand		Category/ Type	
Office Sought: House X Senate President State: NY Disburs	sement For: 2010 Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: B6D5F5A014DC54C5
Guthrie for Congress			Date of Disbursement
Mailing Address PO Box 9639			10 13 7 2010
City Bowling Green	State Zip Code KY 42102		Amount of Each Disbursement this Period
Purpose of Disbursement			1000.00
Candidate Name Rep. Steven Brett Guthrie		Category/ Type	
Senate President	sement For: 2010 Primary X General Other (specify)		
State: KY District: 02			
SUBTOTAL of Disbursements This Page (optional))	>	7000.00
OTAL This Period (last page this line number only			

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Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee of committee (The Purpose of State City Category) Full Name (Last, First, Middle Initial) Hall for Congress Committee (RALPH HALL - ROCKWALL, TEX-AS) Hall for Congress Committee (RALPH HALL - ROCKWALL, TEX-AS) Gity State Zip Code Rockwall TX 75087 Purpose of Disbursement Cardidate Name Rep. Ralph M. Hall Office Sought: X House President State Typ Code Salt Lake City UT State Zip Code City State Typ Code President State Types of Disbursement For: 2010 City State Typ Code State City UT State Typ Code State City UT State Typ Code State City Type Types of Disbursement For: 2012 X Senate President State Typ Code State Typ Code State Calvert for Congress Committee Gradidate Name Calvert for Congress Committee Mailing Address PO Box 20123 City State Typ Code Code State Typ Code Code State Typ Code State Typ Code State Typ Code State Typ Code Code State Typ Code State Typ Code State Typ Code Code Code State Typ Code Code Code State Typ Code Code Code Code Code Code Code Code	Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soldning contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purpose, other than using the name and address of any political committee to solicit contributions from such committee or for commercial purpose of soliciting contributions from such committee. NAME OF COMMITTEE (in Full) American Academy of Dermatology Association Political Action Committee (SkinPAC) Full Name (Last, First, Middle Initial) Hall for Congress Committee (RALPH HALL - ROCKWALL, TEX-AS) Transaction ID: BED69978B79834E40 Date of Disbursement Candidate Name Rep. Ralph M. Hall Office Sought: Y State Zip Code Primary X General President District: 04 Full Name (Last, First, Middle Initial) Hatch Election Committee Inc Mailing Address 75 South West Temple Suite 650 City State Zip Code Zip C	ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 🛛 23 🔲 24 🔲 25 🔲 26				
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	Mailing Address 1006 Pendleton Street			10 13 2010
	City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Period
	Purpose of Disbursement			2500.00
	Candidate Name		Category/ Type	
	Senate President	ement For: 2010 Primary General Other (specify) ▼		
	State: District: Other2	2010		
	Full Name (Last, First, Middle Initial) Rodney Alexander for Congress, Inc.			Transaction ID: B0E1356E1CCA240F1 Date of Disbursement
	Mailing Address 319 NANCY'S ROAD			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $
	City Quitman	State Zip Code LA 71268		Amount of Each Disbursement this Period
	Purpose of Disbursement		, ,	1000.00
	Candidate Name Rep. Rodney Alexander		Category/ Type	
	Office Sought: X House Senate President State: LA District: 05	ement For: 2010 Primary X General Other (specify)		
	Full Name (Last, First, Middle Initial) Simpson for Congress			Transaction ID: B1B0284223991483AA Date of Disbursement
	Mailing Address 1487 Parkway Drive			10 13 / 2010
	City Blackfoot	State Zip Code ID 83221		Amount of Each Disbursement this Period
	Purpose of Disbursement			2000.00
	Candidate Name Rep. Mike K. Simpson		Category/ Type	
	Office Sought: X House Senate President State: ID District: 02	ement For: 2010 Primary X General Other (specify)		
	Simo. 15 Diotriot. 02			
	JBTOTAL of Disbursements This Page (optional)			5500.00

ITEMIZED DISBURSEMENTS	Use sepa	arate schedule(s) category of the	FOR LINE (check only	one)	PAGE 17/18
		Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nan					
NAME OF COMMITTEE (In Full) American Academy of Dermatology Asso	ciation Poli	itical Action Co	mmittee (Skin	PAC)	
Full Name (Last, First, Middle Initial)					B3075ACEB89EA4DF0
Sue Myrick for Congress				Date of Disburse	
Mailing Address PO Box 37091				10 1	3 7 2010
City Charlotte	State NC	Zip Code 28237		Amount of Each	Disbursement this Period
Purpose of Disbursement					1000.00
Candidate Name Rep. Sue Myrick			Category/ Type		
Office Sought: X House Senate President State: NC District: 09	ement For: Primary Other (spe	2010 X General	71		
Full Name (Last, First, Middle Initial) Upton for All of Us				Transaction ID: Date of Disburse	BD355EAFC615F42BC
Mailing Address PO Box 490					3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City St. Joseph	State MI	Zip Code 49085		Amount of Each	Disbursement this Period
Purpose of Disbursement					2000.00
Candidate Name Rep. Fred Upton			Category/ Type		
Office Sought: X House Disburs Senate President State: MI District: 06	ement For: Primary Other (spe	2010 X General ecify) ▼			
Full Name (Last, First, Middle Initial) Wally Herger for Congress Committee				Transaction ID: Date of Disburse	B091D28CE738044638
Mailing Address PO Box 1007				10 1	$\begin{bmatrix} D \\ 2 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Willows	State CA	Zip Code 95988		Amount of Each	Disbursement this Period
Purpose of Disbursement		11300			2500.00
Candidate Name Rep. Wally Herger			Category/ Type		
Senate	Primary	2010 X General			
State: CA District: 02	Other (spe	ecily) ▼			
CURTOTAL of Dishumanus at This Board of the					5500 00
SUBTOTAL of Disbursements This Page (optional))		5500.00

SCHEDULE B (FEC Form 3X)			Use separate schedule(s) (chec					LINE NUMBER: ck only one)						PAGE 18/18				
ITEMIZED DISBURSEMENTS			for each category of the Detailed Summary Page		21b 27		22 28a	Х	23 28b		24 28c		25 29	26 30				
	ny Information copied from such Reports and Stat for commercial purposes, other than using the na													ĺ				
\rangle	NAME OF COMMITTEE (In Full) American Academy of Dermatology Ass	ociation Po	litical Action Com	mitte	ee (Ski	nΡ	AC)											
	Full Name (Last, First, Middle Initial) Westmoreland for Congress Mailing Address P.O. Box 458						Date o		ion ID: isburse				B2E8F		_ 3В70			
	City Sharpsburg Purpose of Disbursement	State GA	Zip Code 30277				Amou	nt c	of Each	Dis	burser	-	t this P	eriod	_			
	Candidate Name Rep. Lynn A. Westmoreland			Cateo Typ	•													
	Office Sought: X House Senate President State: GA District: 03	rsement For: Primary Other (sp	X General															

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	—	57500.00